2026 Fall Teen Lock-In Permission Form

PARENTS PLEASE KEEP THIS PAGE

In order to participate in the Teen Lock-in program at GCDPL ***Byesville Branch*** on November 6th, this permission slip **MUST** be filled out in its entirety and returned to any GCDPL staff member no later than Monday, November 2nd. NO Permission Forms will be accepted after November 2nd. Space is limited to the first **20** teens to turn in their permission slips with parent and emergency contact information included. If less than 7 teens register for this lock-in, it will not be held, and participants will be notified. Participants must be between the ages of 11 and 17 in order to attend this program. **The Fall Teen Lock-in will begin at 6:00PM. All participants must be checked in at the main lobby and sign in by 6:15PM to attend the lock-in.** Late arrivals will not be admitted. Attendees will have the opportunity to be involved in a number of different activities. The library is not responsible for lost or stolen items. Food and refreshments will be served that will/may contain sugar, gluten, soy, peanuts, milk, and/or dairy. **Teens must be picked up or off of library property no later than at 11:00PM by parent/guardian/emergency contact, unless otherwise noted on their form.** Library staff will verify the identity of those picking teens up from the event. Participants will not be allowed to leave early, except in cases of emergency, illness, or parental pick up. With parental permission, exceptions can be made for teens that have their own transportation and provide a valid driver's license as well as a vehicle on GCDPL grounds the day of the Lock-In. All teens must sign out with library staff. Once a teen signs out, there will be no re-entry allowed into the event. **For their safety, teens not picked up or off the property by 11:15PM may be taken into custody by the Sheriff's Dept.**

*In case of emergency, you may call the Youth Services Supervisor, Lauren Burris, at **(740) 685-2236**.*
Please only call in cases of emergency.

GCDPL

TEEN'S NAME_____

I, _____, the legal parent/guardian of the above-mentioned give permission for

my dependent, (please print) _____, to participate in

EVENT: 2026 Fall Teen Lock-In at GCDPL Byesville Branch

EVENT LOCATION: Friday, November 6th, 2026 @ 100 Glass Avenue Byesville, Ohio

DROP OFF TIME: All participants must arrive by 6:00PM and meet in the Main lobby. At 6:15PM the doors to the library will be locked!

PICK UP TIME: Event ends @ 11:00PM. All participants must be picked-up or off of library property no later than 11:15PM.

I give my child permission to attend this library sponsored event. I understand and accept the normal risks inherent to such activity or program, and GCDPL cannot guarantee the health and safety of program participants. In case of emergency, I request efforts to be made to contact me or the person I have named below for this purpose. If neither I nor the emergency contact are reachable, or if it is prudent to render immediate aid, I hereby give permission for GCDPL personnel to use their best judgment in assisting my ill or injured child and in arranging medical attention. I hereby agree to indemnify and hold harmless to GCDPL, its agents, employees, and officers; and the organizers, volunteers, and sponsors. I hereby agree to the removal of my child from this library sponsored event if they are being disruptive or uncooperative.

DATE: _____ **TEEN'S AGE:** _____

NAME OF PARENT/GUARDIAN: _____

PARENT/GUARDIAN EMAIL: _____

SIGNATURE OF PARENT/GUARDIAN: _____

TELEPHONE: CELL (_____) _____ **HOME** (____) _____

LIST OF ALLERGIES/HEALTH CONCERNS: _____

EMERGENCY CONTACT IF PARENT/GUARDIAN IS UNAVAILABLE: *(must be filled out)*

NAME: _____

EMAIL: _____

TELEPHONE: CELL (_____) _____ **HOME** (____) _____

I give permission to GCDPL to use my minor child's image in photos or video taken at GCDPL sponsored functions in order to publicize or promote library activities, including the library's website and social media pages.

PARENT SIGNATURE: _____

I agree to all the terms of this permission slip and to follow the rules & policies of the library.

TEEN SIGNATURE:_____